Attorney Docket No.: SONY-50R4813

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PAIN		ON IN	THE UNITED STATES PATENT AND TRADEMARK OFFICE						
No. of the last of	bearing F	his transmittal of the below described document is being deposited with the United States Postal Service in an envelope lostage and addressed to the Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450, on the below date							
Ì	Date of Deposit:	01/20/	Name of Person Making the Deposit:  KATHERINE RINALDI   Signature of the Person   Making the Deposit:   Making						
	In re Application of: Ryuichi Iwamura								
	Applica	tion No.	: 09/972,371 Examiner: B. LANIER						
	Filed:	10/05/	/01 Art Unit: 2132						
	Confirmation No.: 4728								
	For: M	For: METHOD AND SYSTEM FOR A SECURE DIGITAL DECODER WITH SECURE KEY DISTRIBUTION							
	Commissioner for Patents P.O. Box 1450								
		andria, VA 22313-1450  AMENDMENT TRANSMITTAL							
	Transmitted herewith is an amendment for this application								
	Tr	Transmitted herewith is a response to an office action for the above identified patent application.  (12 sheets)  Transmitted herewith are sheets of substitute formal drawings.  Other:  Applicant is other than a small entity							
		пррпос	Extension of Term						
	3.								
	(a)	[X]	Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)						
			Extension       Fee         [ ] one month       \$120.00         [ X ] two months       \$450.00         [ ] three months       \$1,020.00         [ ] four months       \$1,590.00         [ ] five months       \$2,160.00         Fee \$ 450.00						
ľ	If an ac	If an additional extension of time is required, please consider this a petition therefor.							
	(b)	[]	Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.						
01/25/2006	HDESTA1	00000015	i 09972371						
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1 of 2

Attorney Docket No.: SONY-50R4813

## Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)									
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total				
Total Claims	11	- 25 =	0	x \$50.00	\$0.00				
Independent Claims	2	- 4 =	0	x \$200.00	\$0.00				
Multiple Dependent Claim Fee (one or more, first added by this \$360.00 amendment)									
Total Fees									

## **PAYMENT OF FEES**

- 5. The full fee due in connection with this communication is provided as follows:
- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

  A duplicate copy of this authorization is enclosed.
- [ x ] A check in the amount of \$450.00
- [ ] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

## WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer No: 45589

Respectfully submitted,

Date: 1/29/2006

Anthony C. Murabito Reg. No. 35,295